AMENDED IN ASSEMBLY MAY 3, 2012 AMENDED IN ASSEMBLY APRIL 16, 2012 AMENDED IN ASSEMBLY MARCH 29, 2012 AMENDED IN ASSEMBLY MARCH 19, 2012

CALIFORNIA LEGISLATURE—2011–12 REGULAR SESSION

## ASSEMBLY BILL

No. 2009

## **Introduced by Assembly Member Galgiani**

February 23, 2012

An act to amend Section 104900 of the Health and Safety Code, relating to communicable disease.

## LEGISLATIVE COUNSEL'S DIGEST

AB 2009, as amended, Galgiani. Communicable disease: influenza vaccinations.

Under existing law, the State Department of Public Health administers various programs for the protection of public health. The department provides a biennial report to the Legislature on the immunization status of young children in California.

Existing law requires the State Department of Public Health to provide appropriate flu vaccine to local governmental or private nonprofit agencies at no charge in order that the agencies may provide the vaccine, at a minimal cost, at accessible locations in the order of priority first for all persons 60 years of age or older in this state and then to any other high-risk groups identified by the United States Public Health Service. The department and the California Department of Aging are required to prepare, publish, and disseminate information regarding the

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availability of the vaccine and the effectiveness of the vaccine in protecting the health of older persons.

This bill would *eliminate the priority order described above and would*, instead, give priority to persons within high-risk groups, as defined by the department based upon specified federal recommendations or, in the absence of these recommendations, based upon the need to protect persons who are at the greatest risk of harm from the influenza virus require the department to provide guidance to local agencies as to whether one or more population groups are to have priority for the flu vaccine offered through this program, as specified. The bill would exempt these provisions from the Administrative Procedure Act. The bill would make findings and declarations regarding the transmission of influenza by children to adults and the elderly.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature hereby finds and declares all of 2 the following:
- (a) The federal Centers for Disease Control and Prevention
  (CDC) recommend annual seasonal influenza vaccination for all
  persons six months of age and older.
  - (b) Current law related to prioritization for influenza vaccines is outdated and needs to be updated to reflect current CDC recommendations.
  - (c) Children have the highest rates of influenza infection and schoolaged children are the major vectors for influenza transmission that spread the virus to adults and the elderly in the community.
  - (d) Eligible low-income and uninsured children can access vaccine at no cost through the federally funded Vaccines for Children (VFC) Program.
  - SEC. 2. Section 104900 of the Health and Safety Code is amended to read:
  - 104900. (a) The department shall provide appropriate flu vaccine to local governmental or private, nonprofit agencies at no charge in order that the agencies may provide the vaccine, at a minimal cost, at accessible locations in the order of priority to persons within high-risk groups, as defined by the department,

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based upon the influenza recommendations of the federal Centers for Disease Control and Prevention or, in the absence of federal recommendation, based upon the need to protect persons who are at the greatest risk of harm from the influenza virus. The department and the California Department of Aging shall prepare, publish, and disseminate information regarding the availability of the vaccine and the effectiveness of the vaccine in protecting the health of older persons. In administering this section, the department shall provide guidance to local agencies as to whether one or more population groups shall have priority for the flu vaccine offered through this program. In developing this guidance, the department shall consider the influenza recommendations of the federal Centers for Disease Control and Prevention or other criteria in order to ensure that the vaccination program is efficient and effective in meeting public health goals. Any guidance issued pursuant to this subdivision shall be exempt from the rulemaking provisions of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code). 

(b) The department may provide appropriate pneumonia vaccine to local governmental or private nonprofit agencies at no charge in order that the agencies may provide the vaccine, at a minimal cost, at accessible locations for groups identified as high risk by the United States Public Health Service.

- (c) The program shall be designed to use voluntary assistance from public or private sectors in administering the vaccines. However, local governmental or private, nonprofit agencies may charge and retain a fee not exceeding two dollars (\$2) per person to offset administrative operating costs.
- (d) Except when the department determines that it is not feasible to use federal funds due to excessive administrative costs, the department shall seek and use available federal funds to the maximum extent possible for the cost of the vaccine, the cost of administering the vaccine, and the minimal fee charged under this section, including reimbursement under the Medi-Cal program for persons eligible therefor to the extent permitted by federal law.
- (e) Administration of the vaccine shall be performed by a physician, a registered nurse, or a licensed vocational nurse acting within the scope of their professional practice acts. The physician under whose direction the registered nurse or a licensed vocational

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nurse is acting shall require the nurse to satisfactorily demonstrate familiarity with (1) contraindication for the administration of these immunizing agents, (2) treatment of possible anaphylactic reactions, and (3) the administration of treatment and reactions to these immunizing agents.

- (f) A private, nonprofit volunteer agency whose involvement with an immunization program governed by this section is limited to the provision of a clinic site or promotional and logistical support pursuant to subdivision (c), or any employee or member thereof, shall not be liable for any injury caused by an act or omission in the administration of the vaccine or other immunizing agent to a person 60 years of age or older or to members of high-risk groups identified by the United States Public Health Service, if the immunization is performed pursuant to this section in conformity with applicable federal, state, or local governmental standards and the act or omission does not constitute willful misconduct or gross negligence. As used in this subdivision, "injury" includes the residual effects of the vaccine or other immunizing agent. It is the intent of the Legislature in adding this subdivision to affect only the liability of private, nonprofit volunteer agencies and their members that are not health facilities, as defined in Section 1250.
- (g) This section shall not be construed to require physical presence of a directing or supervising physician, or the examination by a physician of persons to be tested or immunized.